

<http://www.fultontelephone.com/lowincomeassistance.htm>

GENERAL EXCHANGE TARIFF

FULTON TELEPHONE COMPANY, INC.
All Exchanges in Certificated Area

Section 4
Seventh Revision
Sheet 16 of 16

SERVICE CONNECTION CHARGES

LOW-INCOME ASSISTANCE PROGRAM

GENERAL

The Company, as part of its obligations as an Eligible Telecommunications Carrier, offers a low-income assistance program. This program, Lifeline Assistance, is offered under the terms and conditions provided below:

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(T)

Lifeline Assistance

A. General

Lifeline Assistance is a retail service offering available to qualifying low-income subscribers as provided for below. Lifeline Assistance enables eligible subscribers to pay reduced charges for the following package services: voice-grade access to the public switched network; local usage; dual-tone multi-frequency signaling or its functional equivalent; single-party service; access to emergency services; access to operator services; access to interexchange service; access to directory assistance; and toll blocking. An eligible customer receives credit for the Low-Income Assistance Program pursuant to FCC Order 12-11 and MPSC Docket 2007-AD-487.

(T)

B. Regulations

1. A consumer household is eligible for Lifeline Assistance if the total household income is at or below 135% of the Federal Poverty Guidelines. Lifeline Assistance is also available to households containing at least one household member who participates in at least one of the following programs:

(T)
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(T)

- a. Medicaid
- b. Supplemental Nutrition Assistance Program (SNAP), formerly "Food Stamps"
- c. Supplemental Security Income (SSI)
- d. Temporary Assistance to Needy Families (TANF)
- e. Low-Income Home Energy Assistance Program (LIHEAP)
- f. Section 8 Federal Public Housing Assistance (FPHA)
- g. National School Lunch Program's Free Lunch Initiative (NSLP)

(T)

(T)

2. Each subscriber to Lifeline Assistance must certify in writing to the Company, under penalty of perjury, that he/she receives benefits under a program outlined in subparagraph B.1., above, or meets the income-based criteria, and must, on the same document, agree to notify the Company if he/she ceases to participate in the qualifying program. The certification form shall conform to the requirements described herein, and shall be made available upon request to any subscriber. The Company shall retain all such subscriber certifications pursuant to FCC Order 12-11 in order to furnish proof of subscriber eligibility as may be required from time to time by Universal Service administrators.

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(T)

FILED APPROVED

MAY 25 2012

JUL 01 2012

ISSUED: May 23, 2012
MISS. PUBLIC SERVICE
COMMISSION
PUBLIC UTILITIES STAFF

MISS. PUBLIC SERVICE
COMMISSION
EFFECTIVE: July 1, 2012
PUBLIC UTILITIES STAFF

BY: Charles F. Fail, President

12-UN-0191

GENERAL EXCHANGE TARIFF

FULTON TELEPHONE COMPANY, INC.
All Exchanges in Certificated Area

Section 4
Second Revision
Sheet 16.1 of 16

SERVICE CONNECTION CHARGES

LOW-INCOME ASSISTANCE PROGRAM

Lifeline Assistance (continued)

B. Regulations (continued)

3. All applications for this service are subject to verifications with the state agency responsible for administration of the qualifying program. The Company may request any additional documentation deemed necessary prior to providing Lifeline benefits such as an administrating agency's official designation of eligibility in a particular means-based program found in sub-paragraph B.1., above, and that the telephone subscriber is the financially responsible party for the qualifying member of his or her household, or that the eligible household member is the telephone subscriber's dependent pursuant to the rules and regulations of the Internal Revenue Service. (D) (T)
4. A subscriber may elect at the time of subscription to Lifeline Assistance to receive toll blocking as part of Lifeline Assistance. "Toll blocking" is a service that permits a subscriber to elect not to allow the completion of outgoing toll calls from the subscriber's residence.
5. Lifeline Assistance will not be disconnected for non-payment of toll charges, however, in the event toll charges are not paid within 10 days of the mailing of the Company bill, the Company will implement toll blocking immediately thereafter. In addition, the Company will not deny re-establishment of local service to customers who are eligible for Lifeline Assistance and have previously been disconnected for non-payment of toll charges. Lifeline Assistance will not be connected if an outstanding balance is owed by the customer for local service.
6. The Company may not collect a service deposit in order to initiate Lifeline Assistance if the qualifying low-income subscriber voluntarily elects toll blocking from the Company, where available.

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COMMISSION
PUBLIC UTILITIES STAFF**

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GENERAL EXCHANGE TARIFF

FULTON TELEPHONE COMPANY, INC.
All Exchanges in Certificated Area

Section 4
Second Revision
Sheet 16.2 of 16

SERVICE CONNECTION CHARGES

LOW-INCOME ASSISTANCE PROGRAM

Lifeline Assistance (continued)

B. Regulations (continued)

7. The Company will reconcile and confirm all subscribers' eligibility annually pursuant to FCC Order 12-11 by requiring each Lifeline subscriber to respond to and provide proof of continuing program eligibility under penalty or perjury via a FCC-compliant survey that their household continues to meet program eligibility requirements specified in B.1., above. Lifeline subscribers who are determined to be ineligible shall be notified of their ineligibility in writing by the Company and provided 30 days from the date of such notice to rectify or otherwise demonstrate their eligibility prior to the discontinuance of their Lifeline benefits. All unresolved disputes regarding Lifeline eligibility shall be brought to the attention of the MPSC for resolution. (N)

8. Only one Lifeline service is available per residential household pursuant to FCC Order 12-11. A household is any individual or group of individuals who are living together at the same address as one economic unit. A household may include related and unrelated persons. An "economic unit" consists of all adult individuals contributing to and sharing in the income and expenses of a household. An adult is any person eighteen years or older. When an adult having no or minimal income and living with someone who provides financial support to him or her, both people shall be considered part of the same household. Children under the age of eighteen living with their parents or guardians are considered to be part of the same household as their parents or guardians. A household is not permitted to receive Lifeline benefits from multiple providers. (N)

9. A Lifeline customer may subscribe to any local service offering available to other residential customers. (N)

10. The PIC charge will not be billed to Lifeline customers who subscribe to toll blocking and do not presubscribe to a long distance carrier. (N)

NOTE: Section "C. Credits" of this tariff has been moved to Sheet 16.3

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MAY 25 2012

MISS. PUBLIC SERVICE
COMMISSION
PUBLIC UTILITIES STAFF

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BY: Charles F. Fail, President

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COMMISSION
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GENERAL EXCHANGE TARIFF

FULTON TELEPHONE COMPANY, INC.
All Exchanges in Certificated Area

Section 4
Third Revision
Sheet 16.3 of 16

SERVICE CONNECTION CHARGES

LOW-INCOME ASSISTANCE PROGRAM

Lifeline Assistance (continued)

C. Credits (N)

1. The following credits will apply for each customer eligible for Lifeline Assistance.

	Monthly Credit	
a. Lifeline Credit	\$9.25	(C)
b.		(D)

2. (D)

3. Partial payments that are received from Lifeline customers shall first be applied to local service charges and then to any outstanding toll charges.

Link-Up (D)

The Link-Up Assistance Program for non-tribal lands has been discontinued pursuant to FCC Order 12-11.

NOTE: Section "C. Credits" of this tariff has been moved to this sheet from Sheet 16.2

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GENERAL EXCHANGE TARIFF

FULTON TELEPHONE COMPANY, INC.
All Exchanges in Certificated Area

Section 4
Second Revision
Sheet 16.4 of 16

SERVICE CONNECTION CHARGES

LOW-INCOME ASSISTANCE PROGRAMS

Link-Up

(D)

The Link-Up Assistance Program for non-tribal lands has been discontinued pursuant to FCC Order 12-11.

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PUBLIC UTILITIES STAFF

ISSUED: May 23, 2012

EFFECTIVE: July 1, 2012

BY: Charles F. Fail, President



Lifeline Assistance Program

Application and Certification Form

First Name: _____ MI: _____ Last Name: _____

Last Four Digits of Social Security Number: _____ Date of Birth: _____

Physical Address: _____

City: _____ State: MS Zip: _____

My Physical Address is ☐ Permanent ☐ Temporary ☐ Multi-Household

Billing Address: _____

City: _____ State: _____ Zip: _____

Telephone Number for which Lifeline Credits are to apply: _____

= NOTICE =

Lifeline is a federal benefit; only one Lifeline service is allowed per household; a household cannot receive benefits from more than one telephone service provider; a household is defined as any individual or group of persons living together at the same address sharing income and expenses (an "economic unit"); and Lifeline is a non-transferable benefit. Households receiving Lifeline benefits from more than one telephone company will be de-enrolled. Prosecution by the federal government for this offence is possible.

Are you or any member of your household already receiving Lifeline benefits from a telephone company?
☐ YES ☐ NO If yes, please be aware that only one Lifeline benefit is allowed for each household.

= PROGRAM ELIGIBILITY CRITERIA =

_____ (Please initial if applicable) I certify that either a member of my household or I participate in the below-marked assistance program. I understand I must provide satisfactory documentation of this participation to Fulton Telephone Company.

- | | |
|--|---|
| <input type="checkbox"/> Supplemental Nutrition Assistance Program (SNAP) | <input type="checkbox"/> Medicaid |
| <input type="checkbox"/> Low Income Home Energy Assistance (LIHEAP) | <input type="checkbox"/> Supplemental Security Income (SSI) |
| <input type="checkbox"/> National School Lunch Program's Free Lunch Initiative | <input type="checkbox"/> Federal Public Housing Assistance (Sect 8) |
| <input type="checkbox"/> Temporary Assistance for Needy Families (TANF) | |

-----OR-----

_____ (Please initial if applicable) I certify that my total household income is at or below 135% of the Federal Poverty Guidelines. I understand I must provide satisfactory documentation of this declaration to Fulton Telephone Company.



Lifeline Assistance Program

Application and Certification Form

I certify under penalty of perjury the following (initial by each certification):

_____ I currently meet Lifeline eligibility as indicated on Page One of this document.

_____ I will notify Fulton Telephone Company within 30 days if I or my qualifying household member cease(s) to meet program eligibility as specified on Page One or, for any reason, no longer meet(s) all Lifeline eligibility criteria. I certify that I understand and agree to comply with this notification requirement under penalty of perjury and prosecution.

_____ If I move to a new address I will notify Fulton Telephone Company within 30 days of my move.

_____ If my address is temporary, I understand that I may be required to verify my address with Fulton Telephone Company every 90 days.

_____ I certify my household is not receiving nor will it receive Lifeline benefits from another telephone company such as Safelink, Assurance, and Reachout Wireless while enrolled in the Lifeline program with Fulton Telephone Company.

_____ I acknowledge that providing false or fraudulent information to receive Lifeline benefits is punishable by law and will result in program de-enrollment and possible program debarment, fines, or imprisonment.

_____ I acknowledge that I will be required to provide proof of continuing program eligibility at least once each year when notified by Fulton Telephone Company, and any failure to do so, on my part, will result in de-enrollment from the Lifeline Assistance Program.

Signature of Applicant: _____ Date: _____

THIS SPACE RESERVED FOR OFFICE USE

Date of eligibility review: _____

Description of applicant's proof of eligibility: _____

(i.e.: SNAP card, SSI program letter, federal tax return, three consecutive months of paycheck stubs, etc.)

Proof of applicant's eligibility reviewed by: _____

(Fulton Telephone Company authorized signature required)

GENERAL EXCHANGE TARIFF

FULTON TELEPHONE COMPANY, INC.
All Exchanges in Certificated Area

Section 2
Third Revision
Sheet 1 of 4

LOCAL EXCHANGE SERVICE TARIFF

GENERAL

1. The rates for local exchange service apply to all customers regardless of whether the communicating devices are rented from the Telephone Company or provided by the subscriber.
2. Customer equipment charges, which are applicable in all exchanges, are shown in other sections of this tariff and are in addition to those shown in this section.
3. This tariff is governed, except as otherwise specified herein, by the General Exchange Tariff which is hereby made part of this tariff. The charges quoted in this tariff are for a period of one month, payable monthly in advance, and entitle the subscriber to local exchange service including Extended Area Service to Fulton, Fairview, Tremont, and Mantachie Exchanges at the rates shown below.

RATES

SERVICE CLASSIFICATION	MONTHLY LINE ACCESS RATE	
Business - One Party	\$16.10	(I)
Residence - One Party	\$11.10	(I)

FILED

SEP - 7 2010

MISS. PUBLIC SERVICE
COMMISSION
PUBLIC UTILITIES STAFF

APPROVED

OCT - 7 2010

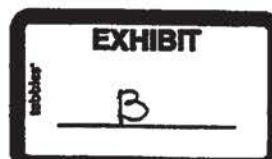
MISS. PUBLIC SERVICE
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10-UN-0322

ISSUED:

BY: Charles F. Fail, President

EFFECTIVE:



REDACTED - FOR PUBLIC INSPECTION

REDACTED – FOR PUBLIC INSPECTION

FULTON TELEPHONE COMPANY, INC. (SAC 280455)

ATTACHMENT - LINE 3017

ATTACHMENT REDACTED IN ENTIRETY